

Health Insurance (Section 3C General Medical Services - COVID-19 Telehealth and Telephone Attendances) Amendment (Further Expansion of Remote Attendance Items) Determination 2020

I, David Weiss, delegate of the Minister for Health, make the following determination.

Dated 19 May 2020

David Weiss

First Assistance Secretary

Medical Benefits Division

Department of Health

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1 Name

 This instrument is the *Health Insurance (Section 3C General Medical Services - COVID-19 Telehealth and Telephone Attendances) Amendment (Further Expansion of Remote Attendance Items) Determination 2020.*

2 Commencement

 (1) Each provision of this instrument specified in column 1 of the table commences, or is taken to have commenced, in accordance with column 2 of the table. Any other statement in column 2 has effect according to its terms.

| Commencement information |
| --- |
| Column 1 | Column 2 | Column 3 |
| Provisions | Commencement | Date/Details |
| 1. The whole of this instrument | 22 May 2020 |  |

Note: This table relates only to the provisions of this instrument as originally made. It will not be amended to deal with any later amendments of this instrument.

 (2) Any information in column 3 of the table is not part of this instrument. Information may be inserted in this column, or information in it may be edited, in any published version of this instrument.

3 Authority

 This instrument is made under subsection 3C(1) of the *Health Insurance Act 1973*.

4 Schedules

 Each instrument that is specified in a Schedule to this instrument is amended or repealed as set out in the applicable items in the Schedule concerned, and any other item in a Schedule to this instrument has effect according to its terms.

Schedule 1—Amendments to the COVID-19 Determination

Health Insurance (Section 3C General Medical Services - COVID-19 Telehealth and Telephone Attendances) Determination 2020

1 Subsection 5(1), before “participating midwife” in the Note

Insert:

* dental practitioner

2 Subsection 5(1), after definition of *Schedule*

Insert:

***shared care plan*** has the meaning given by section 9B of the Allied Health Determination.

3 Subsection 8(7)

Repeal the subsection, substitute:

(7) The following items do not apply if the person providing the service specified in the item and the patient have the capacity to undertake an attendance by telehealth:

(a) an item in any of Subgroups 2, 7 to 10, 12, 14, 16, 18, 20, 22, 24, 26, 28, 30, 32, 34, 36 and 38 of Group A40;

(b) an item in Subgroup 2 of Group T4;

(c) an item in any of Subgroups 6 to 10, 12, 14, 16, 18, 21, 22, 24 and 26 of Group M18;

(d) an item in Subgroup 2 of Group M19; or

(e) an item in Subgroup 2 of Group O1.

4 Schedule 1, Group A40, Subgroup 1 (items 91792, 91803, 91804 and 91805, column 2)

Omit “, specialist or consultant physician” (wherever occurring).

5 Schedule 1, Group A40, Subgroup 2 (items 91797, 91812, 91813 and 91814, column 2)

Omit “, specialist or consultant physician” (wherever occurring).

6 Division 2.1 of Schedule 2 (after item 92621)

Insert:

|  |
| --- |
| Subgroup 37 —Specialist, anaesthesia telehealth services |
| 92701 | Telehealth attendance by a medical practitioner in the practice of anaesthesia for a consultation on a patient undergoing advanced surgery or who has complex medical problems, involving a selective history and the formulation of a written patient management plan documented in the patient notes, and lasting more than 15 minutes (other than a service associated with a service to which any of items 2801 to 3000 of the general medical services table apply) | 88.25 |
| Subgroup 38 —Specialist, anaesthesia phone services |
| 92712 | Phone attendance by a medical practitioner in the practice of anaesthesia for a consultation on a patient undergoing advanced surgery or who has complex medical problems, involving a selective history and the formulation of a written patient management plan documented in the patient notes, and lasting more than 15 minutes (other than a service associated with a service to which any of items 2801 to 3000 of the general medical services table apply) | 88.25 |

7 Schedule 3 (after item 93137)

Insert:

|  |
| --- |
| **Subgroup 25 – Allied health, group dietetics telehealth services** |
| 93284 | Telehealth attendance by an eligible dietitian to provide a dietetics health service to a person for assessing the person’s suitability for group services for the management of type 2 diabetes, including taking a comprehensive patient history, identifying an appropriate group services program based on the patient’s needs and preparing the person for the group services if:(a) the person has type 2 diabetes; and(b) the person is being managed by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) under a shared care plan or a GP management plan or, if the person is a resident of an aged care facility, the person’s medical practitioner has contributed to a multidisciplinary care plan; and(c) the person is referred to an eligible dietitian by the medical practitioner using a referral form that has been issued by the Department, or a referral form that contains all the components of the form issued by the Department; and(d) the service is provided to the person individually; and(e) the service is of at least 45 minutes duration; and(f) after the service, the eligible dietitian gives a written report to the referring medical practitioner mentioned in paragraph (c);payable oncein a calendar year for this or any other assessment for group services item (including services to which this item, item 92386, or items 81100, 81110 and 81120 of the Allied Health Determination apply) | 81.15 |
| 93285 | Telehealth attendance by an eligible dietitian to provide a dietetics health service, as a group service for the management of type 2 diabetes if:(a) the person has been assessed as suitable for a type 2 diabetes group service under assessment items 81100, 81110 or 81120 of the Allied Health Determination or items 93284 or 93286; and(b) the service is provided to a person who is part of a group of between 2 and 12 patients; and(c) the service is of at least 60 minutes duration; and(d) after the last service in the group services program provided to the person under this item or items 81105, 81115 or 81125 of the Allied Health Determination, the eligible dietitian prepares, or contributes to, a written report to be provided to the referring medical practitioner; and(e) an attendance record for the group is maintained by the eligible dietitian;to a maximum of 8 group services in a calendar year (including services to which this item or items 81105, 81115 and 81125 of the Allied Health Determination apply) | 20.20 |
| **Subgroup 26 - Allied health, group dietetics phone services** |
| 93286 | Phone attendance by an eligible dietitian to provide a dietetics health service to a person for assessing the person’s suitability for group services for the management of type 2 diabetes, including taking a comprehensive patient history, identifying an appropriate group services program based on the patient’s needs and preparing the person for the group services if:(a) the person has type 2 diabetes; and(b) the person is being managed by a medical practitioner (including a general practitioner, but not a specialist or consultant physician) under a shared care plan or a GP management plan or, if the person is a resident of an aged care facility, the person’s medical practitioner has contributed to a multidisciplinary care plan; and(c) the person is referred to an eligible dietitian by the medical practitioner using a referral form that has been issued by the Department, or a referral form that contains all the components of the form issued by the Department; and(d) the service is provided to the person individually; and(e) the service is of at least 45 minutes duration; and(f) after the service, the eligible dietitian gives a written report to the referring medical practitioner mentioned in paragraph (c);payable oncein a calendar year for this or any other assessment for group services item (including services to which this item, item 92384, or in items 81100, 81110 and 81120 of the Allied Health Determination apply) | 81.15 |

8 Schedule 4 (heading)

Omit “**and Aboriginal and Torres Strait Islander health practitioner services**”, substitute “**Aboriginal and Torres Strait Islander health practitioner and dental practitioner services**”.

9 Subclause 4.1.1 of Schedule 4 (heading)

Omit “and 12”, substitute “, 12, 25 and 26”.

10 Subclause 4.1.1(1) of Schedule 4

Omit “and 93203:”, substitute “, 93203, 93284, and 93286:”.

11 After Division 4.2 of Schedule 4

Insert:

**Division 4.3 - Services and fees – dental practitioner services**

**4.3.1 – Application of dental practitioner services**

 Items 54001 to 54004 apply only to a service provided in the course of dental practice by a dental practitioner approved by the Minister before 1 November 2004 for the definition of ***professional service*** in subsection 3(1) of the Act.

| Group O1—Consultations |
| --- |
| Subgroup 1—dental practitioner telehealth services |
| Column 1Item | Column 2Description | Column 3Fee ($) |
| 54001 | Telehealth attendance (other than a second or subsequent attendance in a single course of treatment) by an approved dental practitioner in the practice of oral and maxillofacial surgery, if the patient is referred to the approved dental practitioner | 86.90 |
| 54002 | Telehealth attendance by an approved dental practitioner in the practice of oral and maxillofacial surgery, each attendance after the first in a single course of treatment, if the patient is referred to the approved dental practitioner | 43.70 |
| Subgroup 2—dental practitioner phone services |
| Column 1Item | Column 2Description | Column 3Fee ($) |
| 54003 | Phone attendance (other than a second or subsequent attendance in a single course of treatment) by an approved dental practitioner in the practice of oral and maxillofacial surgery, if the patient is referred to the approved dental practitioner | 86.90 |
| 54004 | Phone attendance by an approved dental practitioner in the practice of oral and maxillofacial surgery, each attendance after the first in a single course of treatment, if the patient is referred to the approved dental practitioner | 43.70 |

Schedule 2—Consequential amendments

Health Insurance (Allied Health Services) Determination 2014

1 Part 4 of Schedule 2 (item 81100, column 2, after paragraph (g))

After the words “and 81120”, insert “or items 93284 or 93286 of the COVID-19 Determination”.

2 Part 4 of Schedule 2 (item 81105, column 2, paragraph (a))

After the words “or 81120”, insert “or items 93284 or 93286 of the COVID-19 Determination”.

3 Part 4 of Schedule 2 (item 81105, column 2, paragraph (f))

After the words “or 81125”, insert “or item 93285 of the COVID-19 Determination”.

4 Part 4 of Schedule 2 (item 81105, column 2, after paragraph (g))

After the words “and 81125”, insert “or item 93285 of the COVID-19 Determination”.

5 Part 4 of Schedule 2 (item 81110, column 2, after paragraph (g))

After the words “and 81120”, insert “or items 93284 or 93286 of the COVID-19 Determination”.

6 Part 4 of Schedule 2 (item 81115, column 2, paragraph (a))

After the words “and 81120”, insert “or items 93284 or 93286 of the COVID-19 Determination”.

7 Part 4 of Schedule 2 (item 81115, column 2, paragraph (f))

After the words “and 81125”, insert “or item 93285 of the COVID-19 Determination”.

8 Part 4 of Schedule 2 (item 81115, column 2, after paragraph (g))

After the words “and 81125”, insert “or item 93285 of the COVID-19 Determination”.

9 Part 4 of Schedule 2 (item 81120, column 2, after paragraph (g))

After the words “and 81120”, insert “or items 93284 or 93286 of the COVID-19 Determination”.

10 Part 4 of Schedule 2 (item 81125, column 2, paragraph (a))

After the words “or 81120”, insert “or items 93284 or 93286 of the COVID-19 Determination”.

11 Part 4 of Schedule 2 (item 81125, column 2, paragraph (f))

After the words “or 81125”, insert “or item 93285 of the COVID-19 Determination”.

12 Part 4 of Schedule 2 (item 81125, column 2, after paragraph (g))

After the words “and 81125”, insert “or items 93285 of the COVID-19 Determination”.